CANCEL THE SEQUESTER: LET DR. WOODRUFF IMPROVE OUR UNDERSTANDING OF THE EFFECTS OF EXPOSURE TO METALS ON HUMAN REPRODUCTIVE HEALTH

# HON. JANICE D. SCHAKOWSKY

OF ILLINOIS

IN THE HOUSE OF REPRESENTATIVES

Thursday, June 20, 2013

Ms. SCHAKOWSKY. Mr. Speaker, I rise to tell my colleagues about the deleterious effect that sequestration is having on biomedical research and our ability to improve the health of people in communities across this country.

This week, Dr. Teresa Woodruff, a reproductive endocrinologist and the Chief of the Division of Fertility Preservation at the Feinberg School of Medicine at Northwestern University, contacted me to explain how the sequester is harming her ability to perform critical research into the effects of toxins on female reproductive health and fertility.

Last year, Dr. Woodruff applied for a grant from the Superfund Research Program, a joint program of the National Institute of Environmental Health Sciences and the National Institutes of Health, to investigate and develop strategies to combat the proliferation of toxins at the DePue, Illinois Superfund site. Her application received a positive score and, after revising her research plan after being told that NIH lacked the resources needed to fully fund the project, she expected to receive funding and begin work this summer.

Unfortunately, Dr. Woodruff's team will be unable to start this critical research. In May, she was told that NIEHS cannot award the Superfund grant because of the sequester—an additional across-the-board cut to an already-modest research budget. The NIEHS administrator responsible for awarding these grants indicated that he had never seen anything like this before in his career—never before was he unable to fund a grant after a positive award decision was made.

Sequestration has pulled the rug out from under our researchers. Instead of working to understand the threats posed by environmental toxins, Dr. Woodruff's team is forced to delay this extremely valuable research. She is not giving up—and she will spend many more hours completing grant applications in hopes that funding will be available in the future. But, in the meantime, research that could result in real improvements for women's health and the environment is being put on hold.

I hope my colleagues will take the time to read a summary of the important research that Dr. Woodruff's team is unable to perform due to the unnecessary and harmful sequester cuts. I urge my colleagues to restore vital research funding by supporting H.R. 900, the Cancel the Sequester Act, so that our researchers can get back to doing their work.

NORTHWESTERN UNIVERSITY REPRODUCTIVE HEALTH HAZARDS SUPERFUND RESEARCH CENTER

### SUMMARY

There is limited understanding of the effects of exposure to metals on human reproductive health. The proposed Northwestern University Reproductive Health Hazards Superfund Research Center was designed to investigate the effects of metal contaminants on reproductive function in DePue, Illinois and in Northwestern University laboratories.

In the village of DePue, which was designated a Superfund site in 1999, the Center would investigate the longitudinal risk of heavy metal contamination on human reproductive health and track how such contaminants are dispersed through the food chain and microbial environments. Additionally, the Center would work with the village of DePue to educate the local community and translate new knowledge into policy changes to improve public health.

At Northwestern University laboratories, Center researchers would also investigate the impact of metals on gamete (egg and sperm) function and reproductive health. Additionally, the team would develop new assays to assess the reproductive health risks of heavy metals and mitigation strategies for metal removal and environmental remediation. The knowledge gained by the Center would be applicable to the village of DePue, Superfund sites, and other contaminated sites across the United States.

#### HISTORY

Our team initially applied to the Superfund Research Program, a joint program of the National Institute of Environmental Health Sciences and the National Institutes of Health, in the spring of 2012. In the fall of 2012, we were awarded a positive score with a good chance or receiving funding in response to our application, and we were asked to supply a letter of information responding to the limited criticisms from the peer review.

In March 2013, we were offered an option informally to receive funding at a reduced amount for a reduced time period since our application was well reviewed and deemed meritorious but available funding was limited. We elected to accept this funding rather than resubmit and provided approximately 80 pages of revised budgets and supporting materials toward this option. That material was well-received, but two weeks prior to the annual resubmission deadline, it was suggested that we also resubmit our original application with revisions because the informally offered funding was in jeopardy due to sequestration and rescission. Even on this limited time-frame we managed to resubmit our application. Despite the continued confidence of the NIH program officers that the reduced grant would be funded as of July or August, in May we were formally informed that it would not be. It is important to note that the NIH receives funding for Superfund Research through the Interior Appropriations Subcommittee rather than the standard Labor/HHS/Education Appropriations Subcommittee, which funds the majority of the NIH budget. We are now awaiting review of the resubmitted grant proposal in November and hope to obtain funding in April 2014.

Sequestration, and the unpredictable nature of funding during this time, has not only delayed the creation of a critical research program but has consumed hundreds of man hours for the research team at Northwestern University.

### CONTACT INFORMATION

Kate Timmerman, PhD, Program Director, Oncofertility Consortium, Northwestern University.

Teresa K. Woodruff, PhD, Vice Chair for Research, Department of Obstetrics and Gynecology; Director, Oncofertility Consortium, Northwestern University. FEDERAL AGRICULTURE REFORM AND RISK MANAGEMENT ACT OF 2013

SPEECH OF

## HON. GERALD E. CONNOLLY

OF VIRGINIA

IN THE HOUSE OF REPRESENTATIVES

Tuesday, June 18, 2013

The House in Committee of the Whole House on the state of the Union had under consideration the bill (H.R. 1947) to provide for the reform and continuation of agricultural and other programs of the Department of Agriculture through fiscal year 2018, and for other purposes:

Mr. CONNOLLY. Madam Chair, as we finish debate on the House farm bill, I can't help but remember when as a young fifteen-year-old I was riveted as America debated these very same issues but with oh such a different outcome. I remember the Senate field hearings in 1967 where our elected leaders highlighted the need for government to protect our most vulnerable. There were those in Congress then who would have had us believe there was nothing we could do. But fortunately Robert Kennedy's trip to the Mississippi Delta changed America forever.

As a country, Kennedy helped us to see poverty firsthand. Innocent children with distended stomachs, who hadn't eaten in days. Their mothers unsure where their next meal would come from. It raised our awareness of and concern for our fellow citizens.

Yet here we are more than 40 years later, and once again we are being presented with those same false choices. The House majority would have you believe we have no choice but to make draconian cuts to the Supplemental Nutrition Assistance Program (or SNAP), a program that we know has worked in reducing significantly malnutrition in America

SNAP has been a critical safety net for millions of families who need help putting food on the table. Nearly half of the 46 million low-income participants are children, and a significant portion of adult participants are employed but simply do not earn enough to support their family.

SNAP provides more than \$1.2 billion in benefits a month to more than 786,000 Virginians. In my district, more than 6,000 households receive SNAP benefits. Sixty percent of those families have children under the age of 18. One-third of these families live below the poverty line despite the fact that 45% have one family member working and 42% have at least two family members working.

Simply put, SNAP prevents hunger in the wealthiest nation on earth. Sadly, the House majority's bill will cut SNAP by \$21 billion, forcing more than 2 million people off this program and causing more than 210,000 children to lose eligibility for free or reduced school meals.

Beyond the human face of hunger, a tragic irony is lost within this policy debate. The very people who routinely call on this body to limit government and rein in spending are today asking for government handouts in the form of crop subsidies and insurance payments.

They want the American taxpayer to cover their risks while telling those at risk of hunger that they are on their own. A bold faced Darwinian philosophy except, of course, when it involves them.